Effective October 1, 2003													
									SMALL ENTITY TYPE		OTHER THAN		
Ľ	OTAL CLAIM	5 						RATE	FEE		RATE	FEE	
F	OR		NUMBER FILED		NUMBER EXTRA			BASIC F	€ .	OF	BASIC FEE	920	
T	OTAL CHARGE	ABLE CLAIMS	9 minus 20=		• • :			XS 9=		ÖR	XS18=	1	
IN	DEPENDENT	CLAIMS '	/ minus 3 =		•			X43=	<del>                                     </del>	1	Yes	<del>                                     </del>	
MULTIPLE DEPENDENT CLAIM PRESENT									+	- °*		<del> </del>	
* If the difference in column 1 is less than zero, enter "0" in column 2						cohumn 2	' [	÷145=	<del> </del>	OR	-290=		
CLAIMS AS AMENDED - PART II								TOTAL	<u> </u>	OR	TOTAL	920	
	,		SMALL	ENTITY	OR	OTHER							
AMENDMENT A		(Column 1) CLAIMS REMAINING AFTER AMENOMIENT		(Colum HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 9	Minus	1-20	<u> </u>	•		XS 9=		OR	X\$18=		
<b>AME</b>	Independent	· 1	Minus	(2		•	r	X43≈ -		OR	X86=		
_	PIRST PRESE	NTATION OF M	JETIPLE DE	PENDENT	CLAIM		上	. 46		1	200	/	
								+145=	<del> </del>	OR	+290=		
		(Column 1)		(Cotum:	n 2)	(Column 3)	A	DOIT. FEE	<u> </u>	JOH .	ADDIT FEE		
0		CLAIMS REMAINING		HIGHE	ST	PRESENT	ſ		ADDI-	1 1	<u></u>	ADDI-	
		AFTER AMENDMENT		PREVIOL PAID FO	JSLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE /	
AMENDMENT B	Total	· 9	Minus	-	19	•	T	XS 9=		OR	X\$18=	/	
	Incependent	• /	Minus	_	Ž	•	H	X43=			X86≈	<del>- /  </del>	
1	FIRST PRESE	$\vdash$			OR	7003	<del>-/-</del>						
				•		• .	Ŀ	+145=		OR.	+290=		
										OR ,	TOTAL DOIT. FEEL		
_		(Column 1)		(Column		(Column 3)						' l	
		REMAINING AFTER AMENDMENT		NUMBE PREVIOUS PAID FO	A SLY	PRESENT EXTRA	Γ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
	lotal .	•	Minus	94		• .	T,	<b>(\$</b> 9=			X\$18=	FEE	
	ndependent	•	Minus	<del></del>	-		-			OR			
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							K43≃ .		OR	X86=		
44.	•						۱.	145=	Į,	OR	+290=		
- 11 [	If the entry in column 1 is tess than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For, IN THIS SPACE is test than 30" enter "20".  TOTAL												
-81	ne Highest Nut	iber Previously Paid er Previously Paid	For IN THIS	SPACE IS IS	ee than	3			opriale box		DOIT. FEE L nn 1.		

FORM PTO-878 (Rev 1000)

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Patern and Trademark Office, U.S. DEPARTMENT OF COMMERCE